

### **Supplemental Material S3. Bracketing statement.**

I am a speech language-pathologist with three years of clinical experience working with children who used AAC and their families. My clinical experiences have provided me with some understanding of the experiences of families supporting their children to use AAC. I acknowledge that the short time that I have spent working with families gave me only a limited understanding of family experiences, compared to the expertise that families have with their children. Additionally, none of the students that I worked with who used AAC experienced significant motor challenges, so I have limited experience with the specific population in this study. I entered this study acknowledging my limited expertise and experience in the area, and recognizing parents as experts on their children and their needs.

In addition to my clinical experiences, I have a long-standing interest in families and family functioning, particularly families of children who have developmental disabilities and use AAC. I have completed coursework on theory regarding family functioning (i.e., family systems theory). My theoretical understanding of families that I gained through this coursework and subsequent writings has influenced how I think about families. I have a conceptual model based on family systems theory that is the lens through which I now view families. I view families as interdependent systems in which all members are integrally linked to one another, much like the elements in a mobile. If you pull on one element in the mobile, the whole mobile moves. Families members are linked to one another in the same way—if an event occurs that affects one member in the family, it affects all members of the family. This theoretical orientation has made me recognize the importance of viewing children who use AAC within the context of the family, which was one of the driving forces for this study. I recognized parents as critical stakeholders in the AAC process with unique insights on how AAC technologies are used in everyday life. I acknowledge that my theoretical understanding and previous clinical experiences could influence how I interpret the data. I will use self-reflection processes throughout data collection and analysis to ensure that interpretations are reflective of participant responses and experiences.